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STUDENT PROFILE FORM

Montana Adult Basic and Literacy Education

Site Name: _____ **Program Year:** _____
Satellite Site: _____ **Enrollment Date:** __/__/__

Student Name: _____
Last First MI Age (at enrollment)

Street Address or PO Box: _____

City: _____ **State:** _____ **Zip Code:** _____

Social Security Number: _____ **SSN Waiver:** _____

Date of Birth: _____ **Live in Rural Area:** ☐ Yes ☐ No

Gender: ☐ Female ☐ Male **Student E-mail Address:** _____

Telephone: _____ **Home** _____ **Cell** _____
_____ **Work** _____ **Other** _____

Primary Instructor: _____

Ethnicity: ☐ American Indian or Alaskan Native **Tribe:** ☐ Assiniboine ☐ Gros Ventre
☐ Asian ☐ Blackfoot ☐ CSKT
☐ Black or African American ☐ Chippewa ☐ Little Shell
☐ Hispanic or Latino ☐ Cree ☐ Northern Cheyenne
☐ Native Hawaiian or other Pacific Islander ☐ Crow ☐ Sioux
☐ White, Non-Hispanic ☐ Other

Affiliation: ☐ Enrolled ☐ Not Enrolled

Last Grade Completed: ____ **Last School Attended Name/City/State:** _____

Is the student a single parent with dependent(s) under the age of 18? ☐ Yes ☐ No

If yes, number of children under 18: _____

Disability: ☐ Yes ☐ No ☐ Not Sure

If the student has a disability, check all that apply:

- | | |
|---|---|
| <input type="checkbox"/> Blindness or vision impairment | <input type="checkbox"/> Hearing loss or impairment |
| <input type="checkbox"/> Learning disability | <input type="checkbox"/> Epilepsy |
| <input type="checkbox"/> Physical impairment | <input type="checkbox"/> ADD/ADHD |
| <input type="checkbox"/> Mental illness (depression, anxiety, mood) | <input type="checkbox"/> Traumatic Brain Injury |
| <input type="checkbox"/> Disorder (personality disorder) | <input type="checkbox"/> Psychosocial (behavior, coping or relationship difficulty) |
| <input type="checkbox"/> Other (please explain) _____ | |

Employment Status: ☐ Employed ☐ Unemployed ☐ Not in the labor force

Housing Status:

- ☐ Confined to an Adult Correction Facility (not able to leave facility)
☐ Confined to a Youth Correction Facility (not able to leave facility)
☐ Living in a Community Correctional Facility (able to leave facility)
☐ Resident of a Mental Health Facility
☐ Resident of a Community Group Home
☐ Resident of a Subsidized Housing Program
☐ Living with friends/family
☐ Own, rent or are purchasing residence
☐ Homeless

Emergency Contact: Name _____ **Phone** _____

Street Address or PO Box: _____

City: _____ **State:** _____ **Zip Code:** _____

How did you hear about the ABE?

- ☐ Employer
☐ Friend or family member
☐ Newspaper or magazine ad
☐ Pamphlet or brochure
☐ Referral by agency/program or institution
☐ Other Reference _____
- ☐ Former student
☐ High school or college student
☐ Other
☐ Radio or tv advertisement
☐ Self referral

Referral Agency Type

- ☐ Educational Institution
☐ Governmental Agency/Program
☐ Private Business
☐ Corrections
☐ Other

Referral Agency Name _____

Agency Contact _____

Reason for Referral:

- ☐ Assessment only
☐ Enrollment in ABE

Program Classification: (check all that apply)

- ☐ Even Start
☐ Foster child payment
☐ Fuel assistance
☐ Homeless
☐ Housing assistance
☐ Medical assistance
☐ Refugee assistance
☐ SSDI or other disability
☐ BIA Public Assistance
- ☐ SSI only
☐ TANF ☐ Tribal TANF
☐ Tribal new
☐ Unemployment benefits
☐ Vocational rehabilitation
☐ WIA
☐ WIC
☐ Workers compensation
☐ Food Stamps

Choose one or two of the following educational advancements:

- ☐ Enter employment*
☐ Enter post secondary education or training*
☐ Receipt of post secondary school diploma or GED*
☐ Retain employment*
☐ Achieve citizenship skills
☐ General involvement in community activities
☐ Improve math skills
☐ Improve reading skills
- ☐ Improve English language skills
☐ Involvement in children's education
☐ Involvement in children's literacy-related activities
☐ Meet work-based project learner goal
☐ Reduction in receipt of public assistance
☐ Voting behavior

What other areas do you need help in? (Check all that apply)

- ☐ Getting a drivers license
☐ Career planning
☐ Counseling
☐ Parenting
☐ Resume writing
☐ Study skills
☐ Job interviewing
☐ Self esteem
☐ Other _____